			IN FEE DET	FRMINATI	ON P	ECOPO	ormation unla		lays a valid OMB	
Substitute for Form PTO-875								Application or Docket Number		
APPLICATION AS FILED - (Column 1)				- PART I (Column 2)		SMALL ENTITY		OR	OTHER THAN OR SMALL ENTITY	
FOR		NUMBER FILE	חטא ם	NUMBER EXTRA		RATE (\$)	FEE (\$)	1	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.16(8), (b), or (c))					1 /	197.	1 1 1 1	1	10010101	FEE (3)
SEARCH FEE (37 CFR 1 16(k), (i), or (m))					1		<u> </u>	1		
EXAMINATION FEE (37 CFR 1.16(o), (µ), or (q))		<del></del>			1		<del> </del>	1		<del></del>
TOTAL CLAIMS (37 CFR 1.16(I))			20 -   .	······································	1		<del> </del>	i		<del> </del>
INDEPENDENT CLAIMS		minus		<del></del>	1 H	· =	<del> </del>	OR	X =	
(37 CFR 1.16(h))		If the specification and drawings exceed 10		exceed 100	-{	( E	<b> </b>		х =	
APPLICATION SIZE' FEE (37 CFR 1 16(s))		1991s of paper, \$250 (\$125 for dditional 50 she 5 U.S.C. 41(a)(	the application r small entity) for eets or fraction ( 1)(G) and 37 C	size fee due or each thereof. See						
MULTIPLE DEPE	NDENT CLA	M PRESENT (37	CFR 1 16(1))		JL			ĺ		
* If the difference in column 1 is less than zero, enter '0' in column 2						TOTAL			TOTAL	
AP	PLICATIO	N AS AMENI	DED PART :	11				-		
	10.1							OR	OTHER	THAN
7 ( ,	(Colum CLAI		(Column 2)	, (====================================		SMALL ENTITY		I OR	SMALL ENTITY	
4 10 11 01 N	REMAI AFTI AMEND	ER MENT	NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDI- TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
Di CER 1 1600	12	Minus	20			25.		_OR	× 5.0 =	
Total (3) CFR 1 (6(4)) (1) CFR 1 (6(4)) (2) CFR 1 (6(4)) (3) CFR 1 (6(4)) (4) Application S	1 2	Minus	3		\ x	1(7) =		OR	× 200 =	-
Application S	ze Fee (37 (	CFR 1 16(s))							200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1 16g))								OR		
						DTAL DD'L FEE		OR	TOTAL ADD'L FEE	
1	(Column		(Column 2)	(Column 3)						
ω 	REMAIN AFTE AMENDA	IING R IENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	1	RATE (S)	ADDI: TIONAL FEE (\$)		RATE (\$)	ADDI- TIONAL FEE (\$)
¥ Total	ļ	Minus				=		OR	λ =	X-1
Total (3) CER (16)  Independent (3) CER (16) Application Size  Application Size		Minus		=	,	-		OR	Х =	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (AT CFR 1 169)								OR		
• If the entry in a	atumo 1 - 1	ar there is		<del></del>	46	TAL DIL FEE		OR	TOTAL ADD'L FEE	
" If the entry in c " If the 'Highest I " If the Highest I	Humber Prei	Cousty Paid For	IN THUS SOURCE			o-				

The 'Highest Humber Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1 The 'Highest Number Previously Paid For' (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering preparing, and submitting the completed application form to the USPTO. Time with vary depending upon the individual case. Any comments on the amount of time you require to complete this form and or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office. U.S. Department of Commerce, P.O. Box 1450. Alexandria, VA. 22313, 1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS Appeals of Complete Commerce and Trademark Officer. ADDRESS SEND TO. Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450